



M E M O R A N D U M

TO: All FIT Staff
FROM: QA Group *Km*
DATE: November 9, 1990
SUBJECT: Pre-site Logbook Readiness Review

In order to reduce logbook omissions and errors, the QA group has developed the attached Pre-site Logbook Readiness Review checklist. Because on-site activities can be very hectic, it is helpful to prepare your logbook prior to leaving the office. A logbook prepared prior to beginning site activities, that contains the elements outlined on this checklist, should save the team leader time while on-site and may serve as a reminder to record required information.

The latest copy of the logbook audit checklist is also attached. The QA staff encourages all team leaders to use this checklist to review the site logbook upon returning from the field. You can use the checklist to perform a self-audit, and you can then correct any errors.

If you have any questions about your logbook or any other QA matters, please feel free to ask a member of the QA staff for help.

Venus Labs
Self Audit.

PRE-SITE LOGBOOK READINESS REVIEW

- ✓ ☒ Cover information (job #, site name, site address, city, state, zip, PAN, TDD, EPA ID#, county).
- ✓ ☒ Page 1 information (job #, telephone number, site name, city, state, TDD, PAN, SSID).
- ✓ ☒ Spaces to record initial information for each days activities (FIT team members and duties, site arrival/departure times, on-going weather, proposed work, reference to site safety logs, non-FIT personnel present).
- ✓ ☒ Spaces to record interview information (start/finish times, FIT/non-FIT participating personnel, questions, offer of sample portions, permission to dispose of site derived waste on site).
- ✓ ☒ Spaces to record site recon information (start/end times, equipment readings, observations). In Activities Log
- ✓ ☒ Statement of decontamination procedures.
- ✓ ☒ Statement of waste disposal procedures (should be determined prior to site inspection). Space provided page 26.
- ✓ ☒ Space for site sketches/maps (it is helpful to attach photocopies of topographic maps or maps from the file).
- ✓ ☒ Space for comments and observations.
- ✓ ☒ Space for daily logs of each days' activities.
- ✓ ☒ Appropriate stamps used (samples, sample paperwork reference, photo log, sample equipment information and readings).
- ✓ ☒ PAN and a space for the date at the top of each page to be used.

C. Hall 13 November 1990

QAN: _____

**ECOLOGY AND ENVIRONMENT, INC.
REGION V LOGBOOK AUDIT FORM**

Audit Date: _____
Team Leader: Hall

Site Name: Venus Labs
Auditor: self

FILO319 SB

I. INITIAL INFORMATION	Yes	No	N/A	Comments
Site Name	<u>X</u>	_____	_____	_____
Location	<u>X</u>	_____	_____	_____
TDD #	<u>X</u>	_____	_____	_____
PAN #	<u>X</u>	_____	_____	_____
EPA ID #	<u>X</u>	_____	_____	_____
Date(s) of Work	<u>X</u>	_____	_____	_____
Book _____ of _____	<u>X</u>	_____	_____	_____
Arrival/Departure Times	<u>X</u>	_____	_____	_____
Proposed Daily Activities	<u>X</u>	_____	_____	_____
On-Going Weather	<u>X</u>	_____	_____	_____
Team Members and Duties	<u>X</u>	_____	_____	_____
Other Personnel and Affiliations	<u>X</u>	_____	_____	_____
II. HEALTH AND SAFETY				
Meeting Conducted	<u>X</u>	_____	_____	<u>Time not recorded in Site Activities Log</u>
Personnel Attending	<u>X</u>	_____	_____	_____
Levels of Protection for each Phase of Work	_____	<u>X</u>	_____	_____
Safety Equipment	<u>X</u>	_____	_____	_____
Equipment ID #	<u>X</u>	_____	_____	_____
Calibration	<u>X</u>	_____	_____	_____
Background Readings	<u>X</u>	_____	_____	_____
On-Site Readings/Locations	<u>X</u>	_____	_____	_____
III. SAMPLE/DATA COLLECTION EQUIPMENT (NON-HEALTH AND SAFETY)				
Types	<u>X</u>	_____	_____	_____
Serial # (ID #)	<u>X</u>	_____	_____	_____
Calibration	_____	<u>X</u>	_____	<u>done but not recorded</u>
Background Readings	_____	_____	<u>X</u>	_____
On-Site Readings/Locations	_____	_____	<u>X</u>	_____
IV. DECONTAMINATION				
Solutions Used	<u>X</u>	_____	_____	_____
Procedures for Personnel	<u>X</u>	_____	_____	_____
Procedures for Equipment	<u>X</u>	_____	_____	_____
V. SI DERIVED WASTES				
Disposal Method	<u>X</u>	_____	_____	_____
VI. DOCUMENTATION				
Camera	<u>X</u>	_____	_____	_____
Lens	<u>X</u>	_____	_____	_____
Serial #	_____	_____	<u>X</u>	_____
Film Type/Roll #	<u>X</u>	_____	_____	_____
Sequence #/Frame #	<u>X</u>	_____	_____	_____
Photographer	<u>X</u>	_____	_____	_____

QA019(09/28/90)

Charles G. Hall
15 November 1990

QAN: _____

Venus Labs
self audit
FJL 0319 SB

VI. DOCUMENTATION (CONT.)	Yes	No	N/A	Comments
Direction	<input checked="" type="checkbox"/>			
Location/subject	<input checked="" type="checkbox"/>			
Date and Time	<input checked="" type="checkbox"/>			
VII. SITE REPRESENTATIVE INTERVIEW				
Start/Finish Times	<input checked="" type="checkbox"/>			in Site Activities Log
Questions/Answers Recorded	<input checked="" type="checkbox"/>			
Maps/File Information				
Accepted	<input checked="" type="checkbox"/>			
Description of Owners/Operators	<input checked="" type="checkbox"/>			
Description of site management practices	<input checked="" type="checkbox"/>			
Descriptions of wastes	<input checked="" type="checkbox"/>			they claim to generate none
Pathways/targets	<input checked="" type="checkbox"/>			
VIII. SITE ACTIVITY				
Pathways/targets observed	<input checked="" type="checkbox"/>			
Reconnaissance Observations	<input checked="" type="checkbox"/>			on site map and in Site Activities
Deviations from approved workplan			<input checked="" type="checkbox"/>	
Site Maps/Sketches	<input checked="" type="checkbox"/>			
Field Calculations	<input checked="" type="checkbox"/>			
Assumptions			<input checked="" type="checkbox"/>	
IX. SAMPLES				
Matrix and Numbers	<input checked="" type="checkbox"/>			
Dates/Times Collected	<input checked="" type="checkbox"/>			
Who Collected Sample	<input checked="" type="checkbox"/>			
Locations	<input checked="" type="checkbox"/>			
Depth	<input checked="" type="checkbox"/>			
Composite/Grab	<input checked="" type="checkbox"/>			
Physical Descriptions	<input checked="" type="checkbox"/>			
Field Measurements	<input checked="" type="checkbox"/>			
Sample ID # (OTR/ITR)	<input checked="" type="checkbox"/>			referenced to paperwork
Custody Tag #	<input checked="" type="checkbox"/>			
Airbill #	<input checked="" type="checkbox"/>			
Chain of Custody #	<input checked="" type="checkbox"/>			
Custody Seal #	<input checked="" type="checkbox"/>			
Bottle Lot #	<input checked="" type="checkbox"/>			
Laboratories	<input checked="" type="checkbox"/>			
Preservation Techniques		<input checked="" type="checkbox"/>		
Receipt for samples given	<input checked="" type="checkbox"/>			
Portions offered to Site Representative	<input checked="" type="checkbox"/>			
Sampling Techniques	<input checked="" type="checkbox"/>			
X. GENERAL				
Each page signed and dated by Team Leader	<input checked="" type="checkbox"/>			
Entries recorded by anyone else initialed			<input checked="" type="checkbox"/>	
Date and PAN # on each page	<input checked="" type="checkbox"/>			

QA019(09/28/90)

Charles G. Hall
15 November 1990

Venus Labs self-audit

15 November 1990

Comments

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X

X

This image shows a single page of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

Date _____

Auditor

Charles G. Hall
15 November 1990